

Clark County Coroner  
1704 Pinto Lane  
Las Vegas, NV 89106  
(702) 455-3210



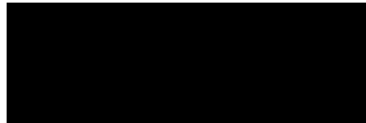
## AUTOPSY REPORT

Case Number: [REDACTED]

October 4, 2017

### AUTOPSY REPORT

#### PATHOLOGIC EXAMINATION ON THE BODY OF



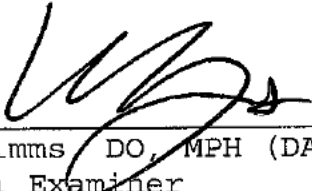
#### DIAGNOSES

1. Gunshot Wound of the Central Upper Back, Penetrating (see injury description).
2. Hemothorax, Right, Chest.
3. Mediastinal Hemorrhage, Chest.
4. Retroperitoneal Hemorrhage, Abdominal Cavity.
5. Pale Internal Organs consistent with Acute Blood Loss.
6. Pulmonary Edema, Bilateral, Lungs.

#### OPINION

**CAUSE OF DEATH:** The cause of death of this [REDACTED]-year-old [REDACTED] female, [REDACTED], is GUNSHOT WOUND OF THE CENTRAL UPPER BACK.

**MANNER OF DEATH:** HOMICIDE.

  
\_\_\_\_\_  
Lary Simms, DO, MPH (DABP-AP, CP, FP)  
Medical Examiner  
Clark County, Nevada (Las Vegas)

DATE: Oct 20 2017

LS/kra/amu

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## AUTOPSY REPORT

Case Number: [REDACTED]

October 4, 2017

### POSTMORTEM EXAMINATION ON THE BODY OF

[REDACTED]

**NOTICE:** Forensic, medical and scientific evidence as proof of a fact can establish that fact to an extent varying between slight possibility to certainty. The minimal standard of proof for all conclusions in this report is to a reasonable degree of scientific, medical and forensic certainty; the degree of certainty for any given conclusion in this report can range from this lowest standard of certainty up to beyond a reasonable doubt.

The manner of death is based on the information available at the time of signature.

**AUTOPSY:** Date of pronounced death is October 2, 2017. The autopsy is performed by Lary Simms, DO, MPH, Medical Examiner, at 1625 hours, October 4, 2017.

**CLOTHING:** The body is received unclothed; a paper ID bracelet is present on the left wrist; accompanying the body are blue socks, blue top, blue bra, jeans, dark shoes, and gray underwear.

**EXTERNAL EXAMINATION:** The body is that of a normally developed obese, [REDACTED] adult. Rigor mortis is present to an equal extent in all joints. Lividity is present posteriorly. The head hair is dark and long. The unshaved scalp is unremarkable. The eyes are closed. The corneas are cloudy. The irides are dark. The nose, lips and mouth are unremarkable. The teeth are natural and in fair repair. No injuries are identified to the external neck. The chest is unremarkable. The abdomen demonstrates striae, but is otherwise unremarkable. The extremities are equally and symmetrically developed. Fingerprint ink is present on the hands bilaterally. The fingernails and toenails are medium in length and demonstrate decoration. The external genitalia are female. The back and buttocks show no evidence of natural disease.

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### INVENTORY OF TATTOOS:

1. A dot located on the left hand.
2. A cross located on the right upper back.

### INVENTORY OF RADIOGRAPHIC FINDINGS:

COMMENT: Digital radiographs are interpreted on an ENTUITIVE monitor; extracorporeal objects are present; degenerative skeletal change is present.

1. Postmortem regional radiographs of the head and neck are unremarkable.
2. Postmortem regional radiographs of the chest demonstrate opacification of the right lung field associated with pneumothorax; the mediastinum demonstrates a right-to-left shift.
3. Postmortem regional radiographs of the abdomen and pelvis demonstrates ballistically significant and insignificant bullet fragments protected over the T9-T11 area; the 10<sup>th</sup> thoracic vertebra demonstrates irregularity.
4. Postmortem regional radiographs of the extremities are unremarkable.

### INVENTORY OF GUNSHOT INJURY:

1. Located in the central upper back 17.5 inches from the top of the head and 1 inch to the right of the midline is a gunshot wound of entrance that measures 0.22 inch in overall dimension; the wound is composed of a central hole measuring 0.12 inch in dimension associated with a circumferential abrasion collar measuring up to 0.05 inch in dimension.

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The bullet courses through the skin and subcutaneous tissues of the central upper back and courses through the thoracic vertebral column at the T10 level.

The thoracic spinal canal is exposed via an anterior approach; the membranous compartments demonstrate diffuse epidural, subdural and subarachnoid hemorrhage; the thoracic spinal cord is lacerated.

The bullet exits from the vertebral body of the 10<sup>th</sup> thoracic vertebra and courses into the aorta; the mediastinum and retroperitoneal soft tissues demonstrate a diffuse hemorrhage.

A deformed small caliber partial metal jacket bullet associated with lead and jacket fragments are recovered from the thoracic vertebral column and the retroperitoneal soft tissues.

The right pleural cavity contains 1900 ml of liquid blood and 300 grams of clot.

The bullet courses from back-to-front directly, and examination of wound of entrance shows no evidence of close-range firing.

### INVENTORY OF ADDITIONAL FINDINGS:

1. The left arm demonstrates an irregular 1.25 inch healing ecchymosis.
2. The legs bilaterally demonstrate scattered irregular ecchymoses measuring up to 2.0 inch in dimension at various stages of healing.
3. The legs bilaterally demonstrate scattered irregular and curvilinear hyperpigment and hypopigment areas.

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4. The arms bilaterally demonstrate scattered irregular and curvilinear hyperpigmented and hypopigmented areas.

### INTERNAL EXAMINATION:

### MEASUREMENTS AND WEIGHTS (approximate/estimate only):

Height: 68 inches  
Weight: 206 pounds  
Heart: 305 grams  
Lungs: 800 grams  
Liver: 1750 grams  
Spleen: 100 grams  
Kidneys: 300 grams  
Brain: 1360 grams

**BODY CAVITIES:** The body is entered by a Y-shaped incision. The peritoneal surfaces of the body are unremarkable. The internal organs that are present retain their normal anatomic position and relationships.

**NECK ORGANS:** The tongue shows no external injury and on serial sectioning is unremarkable. The surfaces of the epiglottis show no abnormalities.

The suprahyoid and infrahyoid (strap) muscles of the neck are dissected in layers and show no evidence of antemortem hemorrhage.

The hyoid bone is dissected. The synchondroses of the hyoid bone are partially fused and intact. The greater horns of the hyoid bone show no evidence of fracture or periosteal hemorrhage.

The thyroid cartilage is dissected. The superior horns and laminae show no evidence of fracture or perichondral hemorrhage.

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The cricoid cartilage ring is dissected. The cricothyroid membrane shows no evidence of hemorrhage. The cricoid cartilage shows no evidence of fracture or perichondral hemorrhage.

The prevertebral soft tissue and muscles of the cervical vertebral column show no evidence of antemortem hemorrhage. The anterior cervical vertebral column shows no evidence of hemorrhage, fracture or dislocation.

**CARDIOVASCULAR SYSTEM:** In addition to the findings previously described, the aorta and great vessels demonstrate yellow streaking. The coronary arteries have a normal surface course and configuration; the coronary circulation is right dominant. On serial sectioning the left coronary artery system and the right coronary artery system exhibit no significant pathologic changes.

The valves of the heart are unremarkable. The ventricular chambers are unremarkable. On serial sectioning the myocardium displays no focal pathologic changes.

**RESPIRATORY SYSTEM:** The trachea and major bronchi are unremarkable. The pulmonary vessels are unobstructed. On serial sectioning the pulmonary parenchyma is pale and demonstrates edema.

**HEPATOBIILIARY SYSTEM:** The capsular surface of the liver is smooth and without adhesions. On serial sectioning the hepatic parenchyma has a pale tan-yellow color and a firm consistency. The gallbladder and biliary tract are unremarkable.

**HEMOLYMPHATIC SYSTEM:** The capsular surface of the spleen is smooth and without adhesions. On serial sectioning the splenic parenchyma is pale. The internal lymph nodes identified are unremarkable.

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**GASTROINTESTINAL SYSTEM:** The esophagus is unremarkable. Stomach content is a few milliliters of brown fluid. The stomach, small bowel and colon are unremarkable. The pancreas has a normal size and on serial sectioning is pale.

**GENITOURINARY SYSTEM:** The renal surfaces are granular. On serial sectioning the renal cortex has a normal thickness and is pale. The calyces, pelves and ureters are unremarkable.

The uterus, fallopian tubes and ovaries are present. The ovaries demonstrate a few smooth-walled cysts bilaterally. The endometrium has a normal appearance.

**ENDOCRINE SYSTEM:** The thyroid gland has a normal size and on serial sectioning is pale. The adrenal glands have a normal size and on serial sectioning are pale. The rest of the endocrine system shows no identifiable abnormalities.

**CENTRAL NERVOUS SYSTEM:** The scalp, subscalp soft tissue and calvaria show no evidence of injury. On entering the cranial cavity the membranous compartments are free of hemorrhage. The leptomeninges and the surfaces of the cerebral hemispheres are unremarkable. The vessels at the base of the brain have a normal configuration. The base of the skull shows no evidence of injury. On serial sectioning the brain is pale and reveals no grossly visible changes of natural disease.

### PHYSICAL EVIDENCE RECOVERY AND DISPOSITION:

1. Deformed small caliber partial metal jacket bullet, bullet fragments and jacket fragments recovered from the retroperitoneal soft tissue and thoracic cervical column to custody of Las Vegas Metropolitan Police Department

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### FLUIDS AND TISSUES SUBMITTED:

1. Postmortem chest blood.
2. Postmortem heart blood.
3. Vitreous humor.
4. Liver tissue.
5. Bile.
6. Brain tissue.
7. Autopsy tissue to stock.

### TESTING ORDERED:

1. Toxicologic analysis [NMS: Basic] on autopsy blood.